



PURCHASE ORDER

PO Number:303-0-0359

Requisition Number:303-0-00829

Order Date: 11/21/2019

Released

MAIL INVOICE TO AGENCY BELOW

TEXAS FACILITIES COMMISSION
FISCAL MANAGEMENT / ACCOUNTS PAYABLE
P.O. BOX 13047 Austin, Texas 78711-3047
OR
email to: accountspayable@tfc.state.tx.us

Delivery Location

--Select--

Show numbers on all papers and packages

Referenced Source or Vendor

17532330374
EKHP Consulting, LLC
425 Oak Spring Drive
Seguin,, TX 78155
Bill Peek
Phone:830-556-9091, Fax:
bill@ekhpcconsulting.com

Network Staff Augmentation

Description

DIR Contract No. DIR-TSO-3500
TFC Contact: Glenn Garvey
(512) 475-2488

Services performed under this agreement are not considered complete for purposes of payment until TFC, or its authorized designee, inspects and accepts the work performed by the vendor.

Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
Network Engineering staff aug for WiFi network (Enterprise Architect 2 Emerging)						
NIGP Class: 962	24	hours	\$167.00	11/21/2019	1/31/2020	\$4,008.00
NIGP Item: 69						
Object Class: 275						
Reimbursement Type: Not Reimbursable						
Grand Total						\$4,008.00

Questions or concerns regarding this transaction or service should be directed to: Texas Facilities Commission Procurement Division, Phone: (512)463-0209 or FAX: (512)236-6164 (The mailing address for the Texas Facilities Commission is at the top of this purchase order.)

Agency	TFC
Fiscal Year	2020
Division	Finance
Program	Information Systems
Phone	5124752488
Org Code	0603 - Information Systems
Type of Purchase/PCC Code	'I' DIR Contract Non-Bulk Purchase
Work Order Number	n/a

ALL TERMS AND CONDITIONS SET FORTH IN OUR BID INVITATION BECOME A PART OF THIS ORDER. VENDOR GUARANTEES MERCHANDISE WILL MEET OR EXCEED SPECIFICATIONS IN THE BID INVITATION.

Invoicing Standards

To facilitate payments from Texas Facilities Commission please follow the invoicing standards set forth below.

The invoice should include, but is not limited to including:

- (1) the vendor's mailing and e-mail (if applicable) address;
- (2) the vendor's telephone number;
- (3) the name and telephone number of a person designated by the vendor to answer questions regarding the invoice;
- (4) the state agency requisition number;
- (5) the state agency's name, agency number, and delivery address;
- (6) the commission's purchase order number, if applicable;
- (7) the contract number or other reference number if applicable;
- (8) a valid Texas Identification Number (TIN) issued by the Comptroller of Public Accounts;
- (9) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (10) unit numbers corresponding to the original order; and
- (11) other relevant information supporting and explaining the payment requested or identifying a successor organization to an original vendor, if necessary.

FOB DESTINATION CASH DISCOUNT: 0% 0 DAYS.

TEXAS FACILITIES COMMISSION INTERNAL PURCHASING

PURCHASER: _____
Sastry, Archana - CTCM, CTPM, 5129363567

(IN ACCORDANCE WITH YOUR BID, SUPPLIES MUST BE PLACED IN THE AGENCY RECEIVING ROOM IN DAYS FROM RECEIPT OF ORDER.)

STATE AND CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Tex. Tax Code § 151.309 (1993), for purchase of tangible property described in this purchase order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

[\(Show Terms And Conditions...\)](#)